

File with:  
Iowa Ethics and Campaign  
Disclosure Board  
510 E. 12<sup>th</sup> Ste. 1A  
Des Moines, Iowa 50319  
Fax: 515-281-4073

Reset Form

FOR INSTRUCTIONS, SEE BACK OF FORM  
**DISCLOSURE SUMMARY PAGE**

IA ETHICS AND  
CAMPAIGN DISCLOSURE BOARD  
2008 OCT 10 AM 9:38

**COMMITTEE NAME** (Must be same as on Statement of Organization)

Committee to Re-Elect Robert Hamann

IMPORTANT: Indicate by # type of committee you are reporting for: 5

( 1 ) Statewide/Legislative/Judge Standing for Retention Candidate ( 2 ) State PAC ( 3 ) State Party  
( 4 ) County Central Committee ( 5 ) County Candidate ( 6 ) City Candidate ( 7 ) School Board or Other Political  
Subdivision Candidate ( 8 ) County PAC ( 9 ) City PAC ( 10 ) School Board or Other Political Subdivision PAC ( 11 ) Local Ballot Issue

**CANDIDATE COMMITTEES ONLY:**

Candidate Name

Robert Hamann

Political Party (if applicable)

Democrat

Office Sought

County Sheriff

District (if Senate or House)

FORM  
**DR-2**

(Rev. 07/2007)

DISCLOSURE  
REPORT

**For Office Use Only**

Comm. # \_\_\_\_\_

Logged in \_\_\_\_\_

Scanned \_\_\_\_\_

Computer \_\_\_\_\_

Audited \_\_\_\_\_

Late reports are subject to possible civil and criminal penalties. Pursuant to Iowa Code sections 68B.32A(7) and 68A.401(3), the candidate, for a

Pam Trueman  
SIGNATURE OF PERSON FILING REPORT

507-421-5130 (cell)  
TELEPHONE

10/6/08  
DATE SIGNED

I AM FILING A Oct 14, 2008 REPORT FOR (1) ELECTION / (2) NON-ELECTION YEAR.  
(report date) Indicate by # ☐

☐ CHECK IF AMENDMENT TO REPORT DATED \_\_\_\_\_

☐ Check if this is final (termination) report and attach Notice of Dissolution Form DR-3.  
(You must continue to file reports until a DR-3 is filed.)

Local Committees, enter Date of Election

11/2008

County & Local Committees, enter County in  
which Election is held

Clayton

**STATEMENT OF CASH ON HAND**

**CASH ON HAND** at the beginning of the reporting period. (Total of all funds held by the committee. This amount **MUST** be the same as the cash on hand at the end of the last reporting period or must be zero if this is first report filed.)

\$ 367.76

**ADD TOTAL MONEY TAKEN IN THIS PERIOD**

Schedule A: Cash Contributions total (Attach Schedule A) (\*also see in-kind below)

3006.00

Schedule F: Loans Received total (Attach Schedule F)

-

Schedule H: Total Sales of Campaign Property (Attach Schedule H)

-

(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL.....\$ 3373.76

**SUBTRACT TOTAL MONEY SPENT THIS PERIOD**

Schedule B: Expenditures total (Attach Schedule B) (\*\*also see debts and loans below)

2366.97

Schedule F: Loan Repayments total (Attach Schedule F)

-

**CASH ON HAND** at the end of this reporting period (if final report balance must be zero)

\$ 1006.97

**\*\*UNPAID BILLS** (From Schedule D - Attach Schedule D)

\$ -

**\*IN KIND CONTRIBUTIONS** (From Schedule E - Attach Schedule E)

\$ 715.00

**\*\*OUTSTANDING LOANS** (From Schedule F - Attach Schedule F)

\$ 0

**CONSULTANT BREAKDOWN** (Schedule G Attached?)

YES X NO

**CANDIDATE COMMITTEES ONLY:**

**VALUE OF CAMPAIGN PROPERTY** (From Schedule H - Attach Schedule H)

\$ 0

**STATE COMMITTEES:** Submit a reconciled campaign account bank statement in January of each year.

COMMITTEE NAME (Must be same as on Statement of Organization)

Committee to Re-Elect Robert Hamann

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SCHEDULE

E

(Rev. 06/97)

IN-KIND  
CONTRIBUTIONS☐ CHECK THIS BOX IF  
AMENDING FORM

DATE RECEIVED (MM/DD/YY)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE * (if applicable)	DESCRIPTION OF IN KIND CONTRIBUTION	ESTIMATED FAIR MARKET VALUE	✓ IF FOR FUND-RAISER CONTRIBUTION
9/27/08	Brian Nading McGregor, Ia 52157	Friend	Fish	\$ 150.00	<input checked="" type="checkbox"/>
9/27/08	Robert Hamann Marquette, Ia 52158	Self	Potato Salad, cups Desserts	50.00	<input checked="" type="checkbox"/>
9/27/08	BOON Garber, Ia 52048	Friend	Silverware, Bake Beans Coffee, BUNS	\$ 75.00	<input checked="" type="checkbox"/>
9/27/08	Pam Troutman 902 2nd St Marquette, Ia 52158	Daughter	Napkins Butter paper plate	\$ 25.00	<input checked="" type="checkbox"/>
10/4/08	Winnie Harverson McGregor, Ia 52157	Friend	Baked Goods	\$ 20.00	<input checked="" type="checkbox"/>
10/4/08	Tammy Hamann McGregor, Ia 52158	Wife	Baked Goods	\$ 25.00	<input checked="" type="checkbox"/>
10/4/08	Carolyn Weipert Prairie du Chien, WI 53821	Sister	Baked Goods	\$ 10.00	<input checked="" type="checkbox"/>
10/4/08	Heleen Russell Marquette, Ia 52158	Friend	Baked Goods	\$ 15.00	<input checked="" type="checkbox"/>
10/4/08	Micki Young Marquette, Ia 52158	Friend	Baked Goods	\$ 25.00	<input checked="" type="checkbox"/>
					<input type="checkbox"/>

SUB-TOTAL

\$

TOTAL (if last  
page of this  
schedule)

\$

715.00

\*Disclosure law requires candidates to disclose the relationship of any relative making an in kind contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). (See Page 2 of forms packet.) If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 1 of 1  
(for Schedule E)

FOR INSTRUCTIONS, SEE BACK OF FORM

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## EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

**STATE PAC COMMITTEES: NOTE:** FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE <b>B</b> (Rev. 07/03)	MONETARY EXPENDITURES
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

**COMMITTEE NAME** (Must be same as on Statement of Organization)

Committee to Re-Elect Robert Hamann

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
9/9/08	ID# CK#	GO America Marquette Ia 52158	Tape, Garbage Bags	\$ 10.17
9/26/08	ID# CK#	Robert Hamann Marquette, Ia 52158	Radio Ad	50.00
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
SUB-TOTAL				\$ 60.17
TOTAL (if last page of this schedule)				\$2366.97

**THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:**

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(i).)

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(for Schedule B)

FOR INSTRUCTIONS, SEE BACK OF FORM

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# EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

**STATE PAC COMMITTEES: NOTE:** FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

<b>SCHEDULE</b> <b>B</b> (Rev. 07/03)	<b>MONETARY</b> <b>EXPENDITURES</b>
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

**COMMITTEE NAME** (Must be same as on Statement of Organization)

Committee to Re-Elect Robert Hamann

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
7/25/08	ID# CK#	Kwik Star McGregor, IA 52157	Gas for parades	\$ 75.54
8/6/08	ID# CK#	Clayton Co. Magister (News Publishing Co.) Waukon IA 52172	Ad	\$ 340.89
8/6/08	ID# CK#	L.W. Darreth Co. PO Box 19430 Denver Co 80219	Campaign Supplies (pens, pads, litter bags)	\$ 1644.81
8/31/08	ID# CK#	River to River 413 High St NE Elkhart, IA 52043	Thank You Ad	\$ 39.00
8/6/08	ID# CK#	Kwik Star McGregor, IA 52157	Gas for Parades	\$ 67.57
8/16/08	ID# CK#	Kwik Star McGregor, IA 52157	Gas for Parades	\$ 83.99
8/30/08	ID# CK#	Central State Bank Marquette, IA 52158	Over draft charge	\$ 15.00
9/4/08	ID# CK#	Treasurer - State of Iowa 321 East 12th St. Des Moines, IA 50319	Gambling license for Benefit	\$ 40.00
SUB-TOTAL				\$ 2306.80
TOTAL (if last page of this schedule)				\$ —

## THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(i).)

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(for Schedule B)

For Instructions, See Back of Form

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**CONTRIBUTIONS -- MONEY TAKEN IN**

(Including candidate's personal funds)

<b>SCHEDULE</b> <b>A</b> (Rev. 07/03)	<b>MONETARY RECEIPTS</b>
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

**COMMITTEE NAME** (Must be same as on Statement of Organization)

Committee to Re-Elect Robert Hamann

**STATE CANDIDATES NOTE:** IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

**NOTE:** ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

**CAUTION:** Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
9/27/08	ID# CK#	Cash Donations	Friends	\$ 491.00	<input type="checkbox"/>
10/4/08	ID# CK#	Cash Donations	Friends	205.00	<input type="checkbox"/>
10/4/08	ID# CK#	voided check # 16 (Treasurer- State of Iowa)	N/A	40.00	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>

SUB-TOTAL

\$ 736.00

**TOTAL (if last page of this schedule)**

\$ 3,006.00

\* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 2 of 2  
(for Schedule A)

For Instructions, See Back of Form

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# CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE <b>A</b> (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Committee to Re-Elect Robert Hamann

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
7/30/08	ID# CK#	Robert Hamann 902 2nd St Marquette, IA 52158	Self	\$ 1800.00	<input type="checkbox"/>
7/23/08	ID# CK#	Daniel or Marilyn Burke 70 Box 216 McGregor, IA 52157	Friends	50.00	<input type="checkbox"/>
7/24/08	ID# CK#	Harold or Chong Wood 111 Eagle Dr. McGregor, IA 52157	Friends	75.00	<input type="checkbox"/>
9/9/08	ID# CK#	Dave Cutler 6015 University Ave Cedar Falls, IA 50613	Friend	100.00	<input type="checkbox"/>
9/9/08	ID# CK#	Dave Brown 70 Box 490 Guttenberg, Ia 52052	Friend	\$ 50.00	<input type="checkbox"/>
9/27/08	ID# CK#	Roger & Dianne Bolsinger 70 Box 6 Garber, IA 52048	Friends	\$ 100.00	<input type="checkbox"/>
9/27/08	ID# CK#	Kathryn & Douglas Meimer 28478 Ironwood Rd Guttenberg, IA 52052	Friends	\$ 25.00	<input type="checkbox"/>
9/27/08	ID# CK#	Arthur Moellering 505 E Centre St. Garnaville, IA 52049	Friend	\$ 20.00	<input type="checkbox"/>
9/27/08	ID# CK#	Gene Armling 70 Box 52 Garber, IA 52048	Friend	\$ 25.00	<input type="checkbox"/>
9/27/08	ID# CK#	James & Susan Dinah Edgewood, IA 52042	Friends	\$ 25.00	<input type="checkbox"/>
SUB-TOTAL				\$2,270.00	
TOTAL (if last page of this schedule)				\$ —	

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(for Schedule A)